RECEIVED
CENTRAL FAX CENTER

DEC 1 6 2003

DB&R

OFFICIAL.

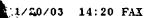
DrinkerBiddle&Reath

One Logan Square
18th and Cherry Streets
Philadelphia, PA 19103-6996

215-988-2700

| FACSIMI | LE INFORMATION SHEET |
|---|--|
| TO: Deny Trai | FROM: Kobut Comuscia EXT. 3303 |
| DATE: 1/-20-13 DOCUMENT | NAME: Responset Find Office Action |
| NUMBER OF PAGES: (INCLUDING COVER): | 15 |
| TELEPHONE NUMBER: | FAX NUMBER: 103-746-32/06 |
| IF YOU DO NOT I ENTIRETY. PLEASE CALL TI | RECEIVE THIS FAX DOCUMENT IN ITS HE SENDER AT THE EXTENSION LISTED ABOVE. |
| DB& | R FACSIMILE MACHINES |
| | 215-988-2757 |
| MESSAGE: | |
| | |
| | |
| | |
| | |
| | |
| Original will not follow | |
| Original will follow via: O Regular Mail | ☐ Overnight Delivery ☐ Hand Delivery ☐ Other |

The pages which follow are confidential and/or privileged. They are intended solely for the person to whom this cover sheet is addressed. Any review, reproduction or retransmission of such material by any person other than such addressee is unauthorized. If this cover sheet and the pages which follow have been received at your location in error, please notify the operator by telephone (collect) at the number set forth above and return the material by U.S. First Class Mail without inspection. We will reimburse your postage. Thank you for your cooperation.



Ø 012

RECEIVED CENTRAL FAX CENTER

DEC 1 6 2003

PATENT

OFFICIAL

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re:

Patent application of

William R. Shaffer

Ser. No.: 09/828,660

Filed:

April 6, 2001

For:

TOOL HAVING HONED CUTTING

EDGE

: Attorney Docket No.:

5249-51DI2 (150907)

Group Art Unit:

2183

Examiner:

Tsai, Henry

RESPONSE UNDER 37 CFR 1.116
- EXPEDITED PROCEDURE -

EXAMINING GROUP ART UNIT

FEE FOR CLAIMS

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Transmitted herewith is a response to the final action of July 30, 2003 for the above-identified application. Enclosed with the response is a petition for a one-month extension of time for responding to the final action.

Amendment of the claims results in a required fee. Charge the fee for claims, as calculated below, to Deposit Account 50-0573.

Please charge any additional fee, or credit any over-payment, to Deposit Account No. 50-0573.

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, along with any paper referred to as being attached or enclosed, is being facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below.

BY

ВТ

PH1P\365761

1

| | Claims Remaining After Amendment | | Highest No. Previously Paid For | Present Extra | Large Entity Rate | Small Entity Rate | Additional Fee |
|-----------------|---|--------------|--|------------------|-------------------------|-------------------------|-------------------|
| Total | 23 | Minus | 27 | = -4 | X 18 | x 9 = | \$ |
| Independent | 10 | Minus | 9 | =1 | x 86 = | x 43 = | \$43 |
| First Presentat | ion of Multiple D | ependent Cla | im | | +290 ≔ | + 145 = | \$ |
| | | | | | | TOTAL | \$43 |

Applicant is a small entity.

Payment of Fee for Claims:

___ No additional fee is required.

X Charge the claims fee of \$43 to Deposit Account No. 50-0573.

Respectfully submitted,

WILLIAM B. SHAFF

BY:

ROBERT E. CANNUSCIO Registration No. 36,469

DRINKER BIDDLE & REATH LLP

One Logan Square 18th and Cherry Sts.

Philadelphia, PA 19103-6996

Telephone: (215) 988-3303 Facsimile: (215) 988-2757

Attorney for Applicant